

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



RECEIVED  
EMAIL  
SEP 29 2009

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Kathol

IMPORTANT: Indicate by # type of committee you are reporting for: 6  
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Jay Kathol

Political Party (If applicable)

Office Sought

Council Bluffs City Council

District (If Senate or House)

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A October, 6 2009

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election  
October 6, 2009  
County & Local Committees, enter County in  
which Election is held  
Pottawattamie

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

4,080.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

4680.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

4588.37

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

91.63

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

1963.11

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

0.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

600.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form



# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Kathol

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8-28-09	ID# CK# 5705	Primmer Business Servies (not a corporation) 506 S. Main St Co.Bluffs, IA 51503		\$100	<input checked="" type="checkbox"/>
8-28-09	ID# CK# 1540	Andrew and Jennifer Guill 101 Wenwood Cir Co.Bluffs, IA 51503		50	<input checked="" type="checkbox"/>
8-27-09	ID# CK# 3280	Randy and Julie Driver 2832 Tara Hills Dr Co.Bluffs, IA 51503		20	<input checked="" type="checkbox"/>
8-27-09	ID# CK# 1343	Juon Investments, LLC 22 Kimberley Co.Bluffs, IA 51503		100	<input checked="" type="checkbox"/>
8-27-09	ID# CK# 3085	Steve Shoemaker 4137 AVe C Co.Bluffs, IA 51501		500	<input checked="" type="checkbox"/>
9-3-09	ID# CK# 5781	Charles and Arthea Youngs 455 Highland Acres Co.Bluffs, IA 51503		20	<input checked="" type="checkbox"/>
9-3-09	ID# CK# 6109	Ed Morris 12582 Deerfield Ct Co.Bluffs, IA 51503		500	<input checked="" type="checkbox"/>
8-31-09	ID# CK# 1000540	John and Linda Allen 13506 Ducat Ct. Corpus Christi, TX 78418		100	<input checked="" type="checkbox"/>
9-1-09	ID# CK# 5544	Bruce and Joni Rasmussen 17971 Bent Tree Rdg Co.Bluffs, IA 51503		20	<input checked="" type="checkbox"/>
8-31-09	ID# CK# 4967	Richard Heininger 17 Cottner Dr Co.Bluffs, IA 51503		25	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1435	
TOTAL (If last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3  
(for Schedule A)

For Instructions, See Back of Form



**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Kathol

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8-26-09	ID# CK# 2111	David Edwards 21276 McPherson Co.Bluffs, IA 51503		\$250	<input checked="" type="checkbox"/>
9-15-09	ID# CK# 5822	Tim and Joyce Koontz 1504 Skyline Dr Co.Bluffs, IA 51503		50	<input checked="" type="checkbox"/>
9-21-09	ID# CK# 3023	Doug and Haifa Drummey 1511 Oran Cir Co.Bluffs, IA 51503		100	<input checked="" type="checkbox"/>
9-13-09	ID# CK# 1001	Harold and Carol Olsen 221 Traders Pt Co.Bluffs, IA 51503		25	<input checked="" type="checkbox"/>
9-2-09	ID# CK# 6044	Neil and Neila Balfour 2108 S 24th ST Lincoln, NE 68502		100	<input checked="" type="checkbox"/>
9-16-09	ID# CK# 12894	James Malone 110 Treetop Ct Co.Bluffs, IA 51503		50	<input checked="" type="checkbox"/>
9-16-09	ID# CK# 5170 & 5171	Ronald Anderson 21650 Hwy 92 Co.Bluffs, IA 51503		50 (25+25)	<input checked="" type="checkbox"/>
9-16-09	ID# CK# 3110	John and Frances Parrott 222 Cloverdale Dr Co.Bluffs, IA 51503		20	<input checked="" type="checkbox"/>
8-27-09	ID# CK# 2535	Jacob and Lisa Peters 130 Sunny Ridge Dr Co.Bluffs, IA 51503		50	<input checked="" type="checkbox"/>
8-26-09	ID# CK# 8316	Scott Doll 77 Pelican Dr Co.Bluffs, IA 51503		150	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 845

**TOTAL (If last page of this schedule)**

\$

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(for Schedule A)

For Instructions, See Back of Form



# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Kathol

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-3-09	ID# CK# 9085	John Hitchcock 1864 Longview Loop Co.Bluffs, IA 51503		\$50	<input checked="" type="checkbox"/>
8-26-09	ID# CK# 9675	Jason and Shari James 17375 235th ST Co.Bluffs, IA 51503		250	<input checked="" type="checkbox"/>
8-26-09	ID# CK# 5204	John Marshall III 1403 Farnam #700 Omaha, NE 68102		100	<input checked="" type="checkbox"/>
8-25-09	ID# CK# 13792	Michael Winter 541 6th Ave Co.Bluffs, IA 51503		100	<input checked="" type="checkbox"/>
8-25-09	ID# CK# 4004	Chad and Gina Primmer 17561 Turnberry Rdg Co.Bluffs, IA 51503		500	<input checked="" type="checkbox"/>
8-24-09	ID# CK# 1737	Cliff and Pam Kathol 112 Greenview Cir Co.Bluffs, IA 51503	Parents	500	<input checked="" type="checkbox"/>
9-4-09	ID# CK# 2040	Michelle and David Hiers 23893 McPherson Ave Co.Bluffs, IA 51503		300	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1800	
TOTAL (If last page of this schedule)				\$ 4080	

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Kathol

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#  CK#			\$
9-23-09	ID#  CK# 1003	The Daily Nonpareil 535 W. Broadway Co. Bluffs, IA 51503	newspaper ads	1529.09
9-24-09	ID#  CK# 1004	GK Malloy Communications 17561 Turnberry Co. Bluffs, IA 51503	direct mail	2264.00
9-1-09	ID#  CK# 1001	GK Malloy Communications 17561 Turnberry Co. Bluffs, IA 51503	literature hand outs	455.00
9-16-09	ID#  CK# 1002	Cellar 19 Wine and Deli 928 Turnberry Ridge Co. Bluffs, IA 51503	open house food and drinks	340.28
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 4588.37

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Kathol

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE  
**D**  
(Rev. 08/98) INCURRED  
INDEBTEDNESS

☐ CHECK THIS BOX  
IF AMENDING  
FORM

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
8-22-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	Stamps	\$ 61.60
8-20-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	Stamps	88.00
8-30-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	Thank you cards	14.97
8-19-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	Envelopes	11.44
8-20-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	yard signs	1,727.10
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1903.11

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

RESET

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Kathol

SCHEDULE

F

(Rev. 02/08)

LOANS  
RECEIVED  
& REPAYED

☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
9-25-09	Jay Kathol 1506 Oran Cir Council Bluffs, IA 51503	self	\$ 600

TOTAL (PART I) \$ 600

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 600

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Page 1 of 1  
(for Schedule F)